BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECO								,D	Application or Docket Number 09 975 389						
Effective October 1, 2001								U,	2401						
	CLAIMS AS FILED - PART I										TITV		OTHE	TUAT	
						SMALL ENTITY TYPE			OR	OTHER SMALL					
то	TAL CLAIMS		# "	9					RATE FEE		FEE]	RATE	FEE	
FOF	٩ ,		NUMBER F	NUMBER FILED		NUMBER EXTRA			BASIC FEE 370.00		370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			\	\		* 0			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			2_ 111111000 =			2	X42			<u> </u>		OR	X84=		
MU	LTIPLE DEPEND	DENT CLAIM PF	RESENT	RESENT			3		+140=			OR	+280=	280	
* If the difference in column 1 is less than zero, enter "0" in column 2						2	i	TOTA	\L		OR	TOTAL	1020		
CLAIMS AS AMENDED - PART II													OTHER	THAN	
,		(Column 1)		(Colu	mn 2)	(Colum	nn 3)	_	SMA	LL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST MBER IOUSLY D FOR	PRESE EXTE			RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
VOME.	Total	. 9	Minus	** 2	0	= /			X\$ 9)=		OR	X\$18=		
ME	Independent	* 2	Minus	***	<u>3</u>	=	\Box		X42	=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							Ì	+140	<u>_</u>		OR	+280=		
Oliver								l	TO	TAL	-		TOTAL		
(Column 1) (Column 2) (Column 3)							^{JU '3} /	1	ADDIT. F	FEE		1014	ADDIT. FEE		
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER IOUSLY D FOR	PRESE	ENT		RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
OME	Total	* 2	Minus		20	= /			X\$ 9:	<u>'=</u>		OR	X\$18=		
AMENDN	Independent	<u>.3</u>	Minus _.	***	2				X42=			OR	V04		
lacksquare	FIRST PRESEN	TATION OF MI		TIPLE DEPENDENT CLAIM				`			 	1			
			* 1					L	+140			OR	+280= TOTAL	ļ	
								,	TO1 ADDIT. F	TAL FEE	<u> </u>	OR	ADDIT. FEE	<u>L</u>	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								_				1			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER TOUSLY D FOR	PRESI EXTI			RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Q Q	Total	*	Minus	**		=			X\$ 9:	=		OR	X\$18=		
ME		*	Minus	***		=			X42=	=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\		_	 				
, * P	If the entry in colum	nn 1 is less than th	ne entry in colu	mn 2, write	e "0" in col	lumn 3.		Ĺ	+140: TOT			OR	+280= TOTAL		
. ** ***	If the "Highest Num If the "Highest Num	nber Previously Pa	aid For" IN THIS aid For" IN THI	S SPACE	is less that is less tha	in 20, ente an 3, ente	er "3."	•	ADDIT. F	FEE			ADDIT. FEE		
	The "Highest Numb	per Previously Pai	id For" (Total or	r Independ	dent) is the	highest :	number	fou	ind in the	e apr	oropriate bo	x in co	niumn 1.		